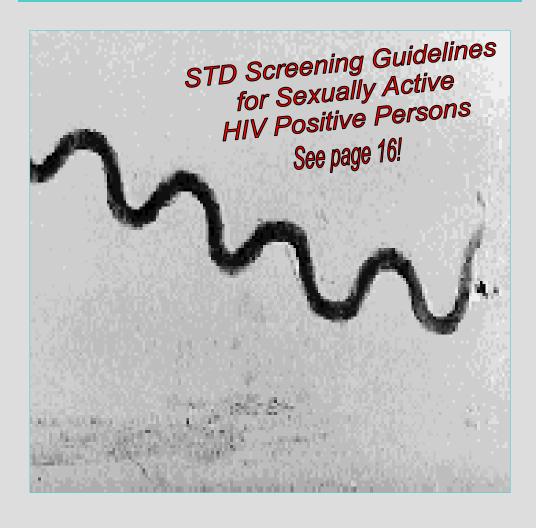




Early Syphilis Surveillance Summary

Cases reported as of September 30, 2003 Issued October 24, 2003



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October 24, 2003

Dear Colleague:

We are pleased to release the October 2003 *Early Syphilis Surveillance Summary* for Los Angeles County. Between January 1 and September 30, 2003, 523 early syphilis cases were reported. During the same period in 2002, a total of 553 cases of early syphilis were reported. With primary and secondary syphilis, 303 cases have been reported year to date (YTD), compared to 273 cases YTD in 2002.

Of 523 early syphilis cases YTD, 350 cases (67%) are among men who have sex with men (MSM) and men who have sex with men and women (MSM/W). One hundred eighty-nine (54%) of these cases are HIV positive. For MSM and MSM/W, cases continue to be concentrated in Metro SPA 4 and the Hollywood-Wilshire health district.

If you would like to view or download the October 2003 *Early Syphilis Surveillance Summary* in full, please visit the STD Program website at www.lapublichealth.org/std. You may also request to receive future reports by e-mail by calling the STD Program at (213) 744-3070.

Sincerely.

Peter R. Kerndt, MD, MPH

Director, Sexually Transmitted Disease Program



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The Early Syphilis Surveillance Summary is published on a monthly basis by the Sexually Transmitted Disease Program of the Los Angeles County Department of Health Services. This report is also available in PDF format, on-line at www.lapublichealth.org/std.

SAS tables and graphs produced by Cathleen Bemis, MS.

If you would like to receive surveillance reports and other information from the STD Program, please call (213) 744-3070 and provide the attendant with your e-mail address or register for *STDInfo* on-line at http://ladhs.org/listserv.

SUGGESTED CITATION

Sexually Transmitted Disease Program, Los Angeles County Department of Health Services. *Early Syphilis Surveillance Summary, October* 2003: pp. 1-16.

FRONT COVER: *Treponema pallidum* (syphilis spirochete)

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Table 1.		2	003			2002 (YTD) 2002								2001					
Early Syphilis - All		Early			Early					Early				Early					
Cases	P&S	Latent	7	otal ES	P&S	Latent	7	otal ES	P&S	Latent	7	otal ES	P&S	Latent	7	otal ES			
	Ν	Ν	Ν	%	Ν	N	Ν	%	Ν	N	Ν	%	N	N	Ν	%			
Morbidity																			
Total	303	220	523	(100.0)	273	280	553	(100.0)	365	353	718	(100.0)	199	222	421	(100.0)			
Gender																			
Male	285	187	472	(90.2)	260	241	501	(90.5)	347	308	655	(91.2)	185	164	349	(82.8)			
Female	18	32	50	(9.5)	13	39	52	(9.4)	18	45	63	(8.7)	12	57	69	(16.3)			
Transgender:M to F		1	1	(0.1)				(0.0)				(0.0)	2	1	3	(0.7)			
Sexual Orientation ¹																			
MSM	198	116	314	(60.0)	194	162	356	(64.3)	268	212	480	(66.8)	125	84	209	(49.6)			
MSM/W	23	13	36	(6.8)	22	10	32	(5.7)	26	14	40	(5.5)	10	5	15	(3.5)			
MSW	24	24	48	(9.1)	26	37	63	(11.3)	30	43	73	(10.1)	30	43	73	(17.3)			
WSM	16	25	41	(7.8)	12	34	46	(8.3)	17	39	56	(7.7)	8	47	55	(13.0)			
WSW		1	1	(0.1)				(0.0)				(0.0)		2	2	(0.4)			
WSW/M				(0.0)				(0.0)				(0.0)		1	1	(0.2)			
TG/STG		1	1	(0.1)				(0.0)				(0.0)	2	1	3	(0.7)			
Refused				(0.0)	3	1	4	(0.7)	2	1	3	(0.4)	4	6	10	(2.3)			
Unknown	42	40	82	(15.6)	16	36	52	(9.4)	22	44	66	(9.1)	20	33	53	(12.5)			
HIV Positive ²																			
Yes	121	83	204	(39.0)	129	116	245	(44.3)	185	153	338	(47.0)	71	64	135	(32.0)			
No	117	82	199	(38.0)	101	88	189	(34.1)	127	111	238	(33.1)	63	70	133	(31.5)			
Unknown	65	55	120	(22.9)	43	76	119	(21.5)	53	89	142	(19.7)	65	88	153	(36.3)			
Race/Ethnicity																			
White	147	66	213	(40.7)	119	86	205	(37.0)	170	111	281	(39.1)	69	41	110	(26.1)			
AfrAmer.	35	38	73	(13.9)	43	38	81	(14.6)	56	52	108	(15.0)	41	31	72	(17.1)			
Latina/o	94	99	193	(36.9)	91	140	231	(41.7)	114	167	281	(39.1)	78	135	213	(50.5)			
Asian/Pac. Is.	11	8	19	(3.6)	11	10	21	(3.7)	13	13	26	(3.6)	7	5	12	(2.8)			
Am.Ind/Alas.Nat.	1	1	2	(0.3)	1	2	3	(0.5)	1	2	3	(0.4)		1	1	(0.2)			
Other/Mixed	5	2	7	(1.3)		1	1	(0.1)		1	1	(0.1)	1		1	(0.2)			
Unknown	10	6	16	(3.0)	8	3	11	(1.9)	11	7	18	(2.5)	3	9	12	(2.8)			
Age Group																			
<15		1	1	(0.1)	1		1	(0.1)	1		1	(0.1)	١.	3	3	(0.7)			
15-19	5	8	13	(2.4)	5	11	16	(2.8)	6	15	21	(2.9)	7	9	16	(3.8)			
20-24	28	22	50	(9.5)	19	38	57	(10.3)	29	44	73	(10.1)	19	18	37	(8.7)			
25-29	41	33	74	(14.1)	32	35	67	(12.1)	41	41	82	(11.4)	29	32	61	(14.4)			
30-34	53	33	86	(16.4)	50	55	105	(18.9)	70	64	134	(18.6)	43	53	96	(22.8)			
35-39	74	51	125	(23.9)	67	56	123	(22.2)	89	69	158	(22.0)	48	54	102	(24.2)			
40-44	50	26	76	(14.5)	49	45	94	(16.9)	62	64	126	(17.5)	27	25	52	(12.3)			
45-49	25	22	47	(8.9)	30	21	51	(9.2)	38	29	67	(9.3)	17	13	30	(7.1)			
50-54	19	14	33	(6.3)	13	12	25	(4.5)	19	17	36	(5.0)	6	6	12	(2.8)			
55-59	5	7	12	(2.2)	4	6	10	(1.8)	5	7	12	(1.6)	1	6	7	(1.6)			
60 +	3	3	6	(1.1)	3	1	4	(0.7)	5	3	8	(1.1)	2	3		(1.1)			

¹ Note: MSM refers to men who have sex with men; MSM/W is men who have sex with men and women; MSW is men who have sex with women; WSM refers to women who have sex with men; WSW is women who have sex with women; WSW/M is women who have sex with women and men. TG/STG refers to male-to-female (M to F) transgenders or to men or women who have sex with M to F transgenders.

Table 2			20	003			20	002		2001			
Table 2. Early Syphilis - SPA and Health D	istrict of Residence	P&S	Early Latent	To	otal ES	P&S	Early Latent	To	otal ES	P&S	Early Latent	To	otal ES
		N	N	Ν	%	N	N	N	%	N	Ν	Ν	%
SPA	District												
SPA 1 - ANTELOPE VALLEY	Other/Unknown	2	1	3	(0.5)	2	5	7	(0.9)	1		1	(0.2)
	SPA Total	2	1	3	(0.5)	2	5	7	(0.9)	1		1	(0.2)
SPA 2 - SAN FERNANDO VALLEY	District												
	East Valley	16	8	24	(4.5)	16	19	35	(4.8)	11	7	18	(4.2)
	Glendale	4	4	8	(1.5)	8	8	16	(2.2)	3	5	8	(1.9)
	San Fernando	8	7	15	(2.8)	4	8	12	(1.6)	2	4	6	(1.4)
	West Valley	21	13	34	(6.5)	14	14	28	(3.8)	9	7	16	(3.8)
	SPA Total	49	32	81	(15.4)	42	49	91	(12.6)	25	23	48	(11.4)
SPA 3 - SAN GABRIEL	District												
	Alhambra	2	4	6	(1.1)	3	2	5	(0.6)	1	2	3	(0.7)
	El Monte		6	6	(1.1)	3	6	9	(1.2)	4	9	13	(3.0)
	Foothill	3	2	5	(0.9)	3		3	(0.4)	2	1	3	(0.7)
	Pomona	7	4	11	(2.1)	5	6	11	(1.5)	5	10	15	(3.5)
	SPA Total	12	16	28	(5.3)	14	14	28	(3.8)	12	22	34	(8.0)
SPA 4 - METRO	District												
	Central	34	21	55	(10.5)	43	65	108	(15.0)	24	29	53	(12.5)
	Northeast	6	9	15	(2.8)	5	14	19	(2.6)	13	11	24	(5.7)
	Hollywood-Wilshire	119	75	194	(37.0)	158	105	263	(36.6)	50	45	95	(22.5)
	SPA Total	159	105	264	(50.4)	206	184	390	(54.3)	87	85	172	(40.8)
SPA 5 - WEST	District												
	West	23	7	30	(5.7)	27	14	41	(5.7)	12	6	18	(4.2)
	SPA Total	23	7	30	(5.7)	27	14	41	(5.7)	12	6	18	(4.2)
SPA 6 - SOUTH	District												
	Compton	6	8	14	(2.6)	5	8	13	(1.8)	5	10	15	(3.5)
	South	3	5	8	(1.5)	4	8	12	(1.6)	1	3	4	(0.9)
	Southeast	3	5	8	(1.5)	4	7	11	(1.5)	7	5	12	(2.8)
	Southwest	8	10	18	(3.4)	12	15	27	(3.7)	11	13	24	(5.7)
	SPA Total	20	28	48	(9.1)	25	38	63	(8.7)	24	31	55	(13.0)
SPA 7 - EAST	District												
	East Los Angeles	5	3	8	(1.5)	4	1	5	(0.6)	4	6	10	(2.3)
	Whittier					2	10	12	(1.6)	5	2	7	(1.6)
	Bellflower	6	1	7	(1.3)	5	3	8	(1.1)	3	8	11	(2.6)
	San Antonio	6	6	12		9	7	16	(2.2)	3	11	14	(3.3)
	SPA Total	17	10	27	(5.1)	20	21	41	(5.7)	15	27	42	(9.9)
SPA 8 - SOUTH BAY	District												
	Harbor	4	2	6	(1.1)	3	6	9	(1.2)	1	1	2	(0.4)
	Inglewood	5	11	16	(3.0)	14	15	29	(4.0)	7	7	14	(3.3)
	Torrance	5	4	9	(1.7)	8	4	12	(1.6)	4	3	7	(1.6)
	SPA Total	14	17	31	(5.9)	25	25	50	(6.9)	12	11	23	(5.4)
UNKNOWN SPA	District												
	Long Beach	2	1	3	(0.5)					4	2	6	(1.4)
	Other/Unknown	5	3	8		4	3	7	(0.9)	7	15		(5.2)
	SPA Total	7	4	11		4	3		(0.9)	11	17		(6.6)

Table 3. MSM ¹		2	2003			2002	2 (YT	D)		2	002		2001						
General Demographics		Early			Early				Early	· ,			Early						
Bomograpinos		Latent		otal ES		Latent		otal ES		Latent		otal ES		Latent		otal ES			
	N	N	N	%	N	N	N	%	N	N	N	%	N	N	N	%			
Morbidity																			
Total	221	130	351	(100.0)	216	172	388	(100.0)	294	226	520	(100.0)	137	90	227	(100.0)			
Sexual Orientation																			
MSM	198	116	314	(89.4)	194	162	356	(91.7)	268	212	480	(92.3)	125	84	209	(92.0)			
MSM/W	23	13	36	(10.2)	22	10	32	(8.2)	26	14	40	(7.6)	10	5	15	(6.6)			
TG/STG		1	1	(0.2)				(0.0)				(0.0)	2	1	3	(1.3)			
HIV Positive ²																			
Yes	114	75	189	(53.8)	120	102	222	(57.2)	171	136	307	(59.0)	70	53	123	(54.1)			
No	83	41	124	(35.3)	71	42	113	(29.1)	90	56	146	(28.0)	39	17	56	(24.6)			
Unknown	24	14	38	(10.8)	25	28	53	(13.6)	33	34	67	(12.8)	28	20	48	(21.1)			
Race/Ethnicity																			
White	129	57	186	(52.9)	103	72	175	(45.1)	151	94	245	(47.1)	59	25	84	(37.0)			
AfrAmer.	18	14	32	(9.1)	24	16	40	(10.3)	33	21	54	(10.3)	20	9	29	(12.7)			
Latina/o	58	53	111	(31.6)	73	75	148	(38.1)	91	97	188	(36.1)	52	47	99	(43.6)			
Asian/Pac. Is.	8	4	12	(3.4)	9	6	15	(3.8)	10	8	18	(3.4)	5	4	9	(3.9)			
Am.Ind/Alas.Nat.		1	1	(0.2)	1	1	2	(0.5)	1	1	2	(0.3)		1	1	(0.4)			
Other/Mixed	4		4	(1.1)				(0.0)				(0.0)	1		1	(0.4)			
Unknown	4	1	5	(1.4)	6	2	8	(2.0)	8	5	13	(2.5)		4	4	(1.7)			
Age Group																			
<15				(0.0)	1		1	(0.2)	1		1	(0.1)				(0.0)			
15-19	1	2	3	(0.8)	3	5	8	(2.0)	3	7	10	(1.9)	4	1	5	(2.2)			
20-24	17	10	27	(7.6)	15	16	31	(7.9)	22	20	42	(8.0)	13	5	18	(7.9)			
25-29	27	17	44	(12.5)	28	17	45	(11.5)	35	22	57	(10.9)	21	14	35	(15.4)			
30-34	40	20	60	(17.0)	42	42	84	(21.6)	58	48	106	(20.3)	26	22	48	(21.1)			
35-39	61	33	94	(26.7)	52	40	92	(23.7)	74	50	124	(23.8)	38	23	61	(26.8)			
40-44	37	19	56	(15.9)	43	32	75	(19.3)	55	47	102	(19.6)	20	15	35	(15.4)			
45-49	21	17	38	(10.8)	20	9	29	(7.4)	27	15	42	(8.0)	9	4	13	(5.7)			
50-54	12	10	22	(6.2)	7	8	15	(3.8)	12	12	24	(4.6)	5	2	7	(3.0)			
55-59	3	2	5	(1.4)	3	3	6	(1.5)	4	4	8	(1.5)	1	3	4	(1.7)			
60 +	2		2	(0.5)	2		2	(0.5)	3	1	4	(0.7)		1	1	(0.4)			

 $^{^{\}rm 1}$ MSM includes gay and bisexual men, M to F transgenders, and men who have sex with M to F transgenders.

Table 4.		20	003			2002	(Y	TD)		2	002			20	001			
General Demographics - Female	P&S	Early Latent		Total ES	P&S	Early Latent		Total ES	P&S	Early Latent		Total ES	P&S	Early Latent	7	Total ES		
	Ν	N	Ν	%	Ν	Ν	Ν	%	Ν	N	Ν	%	N	Ν	Ν	%		
Morbidity																		
Total	18	32	50	(100.0)	13	39	52	(100.0)	18	45	63	(100.0)	12	57	69	(100.0)		
Sexual Orientation																		
WSM	16	25	41	(82.0)	12	34	46	(88.4)	17	39	56	(88.8)	8	47	55	(79.7)		
WSW		1	1	(2.0)				(0.0)			١.	(0.0)		2	2	(2.8)		
WSW/M			١.	(0.0)			٠.	(0.0)			١.	(0.0)		1	1	(1.4)		
Unknown	2	6	8	(16.0)	1	5	6	(11.5)	1	6	7	(11.1)	4	7	11	(15.9)		
HIV Positive ¹																		
Yes	1		1	(2.0)		1	1	(1.9)		2	2	(3.1)		2	2	(2.8)		
No	13	22	35	(70.0)	10	21	31	(59.6)	15	24	39	(61.9)	4	26	30	(43.4)		
Unknown	4	10	14	(28.0)	3	17	20	(38.4)	3	19	22	(34.9)	8	29	37	(53.6)		
Race/Ethnicity																		
White	2	2	4	(8.0)	1	3	4	(7.6)	1	3	4	(6.3)	3	4	7	(10.1)		
AfrAmer.	4	12	16	(32.0)	8	8	16	(30.7)	11	11	22	(34.9)	4	10	14	(20.2)		
Latina/o	12	16	28	(56.0)	4	26	30	(57.6)	6	27	33	(52.3)	4	42	46	(66.6)		
Asian/Pac. Is.		1	1	(2.0)		1	1	(1.9)		2	2	(3.1)				(0.0)		
Am.Ind/Alas.Nat.				(0.0)		1	1	(1.9)		1	1	(1.5)				(0.0)		
Unknown	٠.	1	1	(2.0)				(0.0)		1	1	(1.5)	1	1	2	(2.8)		
Age Group																		
<15		1	1	(2.0)			١.	(0.0)			١.	(0.0)		3	3	(4.3)		
15-19	1	4	5	(10.0)		3	3	(5.7)	1	3	4	(6.3)	1	7	8	(11.5)		
20-24	3	8	11	(22.0)		15	15	(28.8)	1	16	17	(26.9)	1	9	10	(14.4)		
25-29	5	4	9	(18.0)	1	4	5	(9.6)	1	5	6	(9.5)	3	6	9	(13.0)		
30-34	4	4	8	(16.0)	3	4	7	(13.4)	4	4	8	(12.6)	1	12	13	(18.8)		
35-39	4	4	8	(16.0)	4	3	7	(13.4)	5	5	10	(15.8)		11	11	(15.9)		
40-44		1	1	(2.0)		4	4	(7.6)	1	5	6	(9.5)	2	3	5	(7.2)		
45-49	1	5	6	(12.0)	3	3	6	(11.5)	3	4	7	(11.1)	3	4	7	(10.1)		
50-54		1	1	(2.0)	2	1	3	(5.7)	2	1	3	(4.7)		1	1	(1.4)		
55-59				(0.0)		1	1	(1.9)		1	1	(1.5)				(0.0)		
60 +				(0.0)		1	1	(1.9)		1	1	(1.5)	1	1	2	(2.8)		
Prenatal/Pregnant																		
Yes	2	5	7	(14.0)		5	5	(9.6)	1	6	7	(11.1)	1	4	5	(7.2)		
No	12	18	30	(60.0)	11	14	25	(48.0)	15	17	32	(50.7)		11	11	(15.9)		
Unknown	4	9	13	(26.0)	2	20	22	(42.3)	2	22	24	(38.0)	11	42	53	(76.8)		

Table 5. General	2003					2002	רחו		2/	002		2001				
Demographics - Heterosexual		Early	<i>J</i> U3		2002 (YTD) Early					Early		Early)U I	
Men¹	P&S	Latent		Total ES	P&S	Latent		Total ES	P&S	Latent		Total ES	P&S	Latent		Total ES
	N	N	Ν	%	N	Ν	Ν	%	N	Ν	Ν	%	N	Ν	N	%
Morbidity																
Total	24	24	48	(100.0)	26	37	63	(100.0)	30	43	73	(100.0)	30	43	73	(100.0)
Sexual Orientation																
MSW	24	24	48	(100.0)	26	37	63	(100.0)	30	43	73	(100.0)	30	43	73	(100.0)
HIV Positive'2																
Yes	2	2	4	(8.3)	4	1	5	(7.9)	6	1	7	(9.5)		3	3	(4.1)
No	18	17	35	(72.9)	16	23	39	(61.9)	18	28	46	(63.0)	19	27	46	(63.0)
Unknown	4	5	9	(18.7)	6	13	19	(30.1)	6	14	20	(27.3)	11	13	24	(32.8)
Race/Ethnicity																
White	5		5	(10.4)	6	2	8	(12.6)	7	3	10	(13.6)	4	4	8	(10.9)
AfrAmer.	7	6	13	(27.0)	8	10	18	(28.5)	10	14	24	(32.8)	7	6	13	(17.8)
Latina/o	10	15	25	(52.0)	10	23	33	(52.3)	10	24	34	(46.5)	17	32	49	(67.1)
Asian/Pac. Is.	1	2	3	(6.2)	1	2	3	(4.7)	2	2	4	(5.4)	1	1	2	(2.7)
Unknown	1	1	2	(4.1)	1		1	(1.5)	1		1	(1.3)	1		1	(1.3)
Age Group																
15-19	3	2	5	(10.4)	2	3	5	(7.9)	2	5	7	(9.5)	2	1	3	(4.1)
20-24	5	2	7	(14.5)	3	5	8	(12.6)	4	6	10	(13.6)	4	3	7	(9.5)
25-29	2	6	8	(16.6)	3	8	11	(17.4)	4	8	12	(16.4)	2	9	11	(15.0)
30-34	2	2	4	(8.3)	2	5	7	(11.1)	3	5	8	(10.9)	8	9	17	(23.2)
35-39	3	5	8	(16.6)	6	7	13	(20.6)	6	7	13	(17.8)	6	8	14	(19.1)
40-44	4	1	5	(10.4)	2	2	4	(6.3)	2	4	6	(8.2)	2	5	7	(9.5)
45-49	1		1	(2.0)	3	4	7	(11.1)	3	4	7	(9.5)	5	4	9	(12.3)
50-54	4	2	6	(12.5)	3	1	4	(6.3)	4	2	6	(8.2)	1	2	3	(4.1)
55-59		2	2	(4.1)	1	2	3	(4.7)	1	2	3	(4.1)		1	1	(1.3)
60 +		2	2	(4.1)	1		1	(1.5)	1		1	(1.3)	·	1	1	(1.3)

 $^{^{\}rm 1}$ Heterosexual men are male cases who did not report having male or M to F transgender sex partners.

Table 6. Behavioral Risk												
Factors by			0	000					0	002		
Sexual Orientation1	1/01/9	11011/11		003 MSW	Λ ΙΙ	Fomolo	1/01/9	All Female				
Orientation ¹	NSW &	MSM/W	N	WSW %	N	Female %	NSW &	MSM/W	N	MSW %	N	remaie %
Anal	14	/0	14	/0	11	/0	14	/0	14	/0	IN	/0
Insertive												
Yes	204	(65.8)	7	(15.2)		(0.0)	359	(69.0)	5	(6.8)	1	(1.8)
No	50	(16.1)	28	(60.8)	25	(71.4)	74	(14.2)	49	(67.1)	40	(72.7)
Unknown	56	(18.0)	11	(23.9)	10	(28.5)	87	(16.7)	19	(26.0)	14	(25.4)
Anal												
Receptive												
Yes	196	(63.2)	١.	(0.0)	3	(8.5)	348	(66.9)	١.	(0.0)	9	(16.3)
No	59	(19.0)	35	(76.0)	23	(65.7)	79	(15.1)	53	(72.6)	31	(56.3)
Unknown	55	(17.7)	11	(23.9)	9	(25.7)	93	(17.8)	20	(27.3)	15	(27.2)
Oral Sex												
Yes	253	(81.6)	26	(56.5)	21	(60.0)	419	(80.5)	36	(49.3)	22	(40.0)
No	9	(2.9)	8	(17.3)	7	(20.0)	20	(3.8)	17	(23.2)	18	(32.7)
Unknown	48	(15.4)	12	(26.0)	7	(20.0)	81	(15.5)	20	(27.3)	15	(27.2)
Vaginal Sex												
Yes	21	(6.7)	40	(86.9)	30	(85.7)	38	(7.3)	62	(84.9)	51	(92.7)
No	257	(82.9)	-	(0.0)	2	(5.7)	418	(80.3)	4	(5.4)		(0.0)
Unknown	32	(10.3)	6	(13.0)	3	(8.5)	64	(12.3)	7	(9.5)	4	(7.2)
Anonymous Partners												
Yes	201	(64.8)	17	(36.9)	4	(11.4)	344	(66.1)	23	(31.5)	3	(5.4)
No	58	(18.7)	19	(41.3)	21	(60.0)	90	(17.3)	35	(47.9)	39	(70.9)
Unknown	51	(16.4)	10	(21.7)	10	(28.5)	86	(16.5)	15	(20.5)	13	(23.6)
Condom Used ²												
Yes	78	(25.1)	8	(17.3)	6	(17.1)	118	(22.6)	16	(21.9)	7	(12.7)
No	150	(48.3)	27	(58.6)	18	(51.4)	267	(51.3)	36	(49.3)	38	(69.0)
Unknown	82	(26.4)	11	(23.9)	11	(31.4)	135	(25.9)	21	(28.7)	10	(18.1)
Incarcerated Past Year												
Yes	13	(4.1)	5	(10.8)	4	(11.4)	15	(2.8)	7	(9.5)	2	(3.6)
No	241	(77.7)	24	(52.1)	21	(60.0)	357	(68.6)	35	(47.9)	26	(47.2)
Unknown	56	(18.0)	17	(36.9)	10	(28.5)	148	(28.4)	31	(42.4)	27	(49.0)
IV Drug User												
Yes	9	(2.9)	1	(2.1)		(0.0)	14	(2.6)		(0.0)	1	(1.8)
No	252	(81.2)	36	(78.2)	28	(80.0)	420	(80.7)	62	(84.9)	42	(76.3)
Unknown	49	(15.8)	9	(19.5)	7	(20.0)	86	(16.5)	11	(15.0)	12	(21.8)
Non-IV Drug User												
Yes	81	(26.1)	10	(21.7)	8	(22.8)	112	(21.5)	14	(19.1)	5	(9.0)
No	178	(57.4)	27	(58.6)	20	(57.1)	317	(60.9)	44	(60.2)	37	(67.2)
Unknown	51	(16.4)	9	(19.5)	7	(20.0)	91	(17.5)	15	(20.5)	13	(23.6)

¹ Behavioral risk information is available starting in 2001 and includes closed cases only. Does not include cases with no information on sex partners.

² Condom was used at last intercourse.

Table 7.														
Venue Risk by Sexual			2	003			2002							
Orientation ¹	MSM 8	MSM/W		MSW	All	l Female	MSM 8	MSM/W		MSW	All	Female		
	Ν	%	Ν	%	Ν	%	Ν	%	N	%	Ν	%		
Bars and Clubs														
Yes	118	(38.0)	7	(15.2)	1	(2.8)	172	(33.0)	10	(13.6)	3	(5.4)		
No	128	(41.2)	28	(60.8)	24	(68.5)	235	(45.1)	45	(61.6)	38	(69.0)		
Unknown	64	(20.6)	11	(23.9)	10	(28.5)	113	(21.7)	18	(24.6)	14	(25.4)		
Bathhouses/ Sex Clubs														
Yes	51	(16.4)	١.	(0.0)		(0.0)	123	(23.6)	١.	(0.0)		(0.0)		
No	190	(61.2)	33	(71.7)	24	(68.5)	274	(52.6)	51	(69.8)	39	(70.9)		
Unknown	69	(22.2)	13	(28.2)	11	(31.4)	123	(23.6)	22	(30.1)	16	(29.0)		
Motels														
Yes	1	(0.3)	3	(6.5)	2	(5.7)	10	(1.9)	2	(2.7)	2	(3.6)		
No	238	(76.7)	30	(65.2)	22	(62.8)	374	(71.9)	48	(65.7)	37	(67.2)		
Unknown	71	(22.9)	13	(28.2)	11	(31.4)	136	(26.1)	23	(31.5)	16	(29.0)		
Streets														
Yes	14	(4.5)	7	(15.2)	3	(8.5)	29	(5.5)	14	(19.1)	3	(5.4)		
No	228	(73.5)	27	(58.6)	21	(60.0)	357	(68.6)	41	(56.1)	36	(65.4)		
Unknown	68	(21.9)	12	(26.0)	11	(31.4)	134	(25.7)	18	(24.6)	16	(29.0)		
Internet														
Yes	61	(19.6)	.	(0.0)		(0.0)	84	(16.1)	١.	(0.0)		(0.0)		
No	179	(57.7)	33	(71.7)	24	(68.5)	306	(58.8)	51	(69.8)	39	(70.9)		
Unknown	70	(22.5)	13	(28.2)	11	(31.4)	130	(25.0)	22	(30.1)	16	(29.0)		
Parks														
Yes	13	(4.1)	1	(2.1)		(0.0)	25	(4.8)	١.	(0.0)		(0.0)		
No	229	(73.8)	32	(69.5)	24	(68.5)	358	(68.8)	51	(69.8)	39	(70.9)		
Unknown	68	(21.9)	13	(28.2)	11	(31.4)	137	(26.3)	22	(30.1)	16	(29.0)		
Other Venue														
Yes	35	(11.2)	7	(15.2)	2	(5.7)	84	(16.1)	13	(17.8)	3	(5.4)		
No	181	(58.3)	24	(52.1)	18	(51.4)	277	(53.2)	34	(46.5)	36	(65.4)		
Unknown	94	(30.3)	15	(32.6)	15	(42.8)	159	(30.5)	26	(35.6)	16	(29.0)		
Total	310	(100.0)	46	(100.0)	35	(100.0)	520	(100.0)	73	(100.0)	55	(100.0)		

Had sex or met sex partners at defined venues during the period when syphilis infection likely occurred (critical period).
 Venue risk information is available starting in 2001 and includes closed cases only. Does not include cases with no information on sex partners.

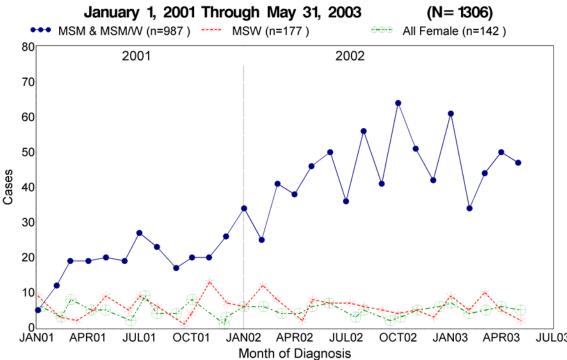
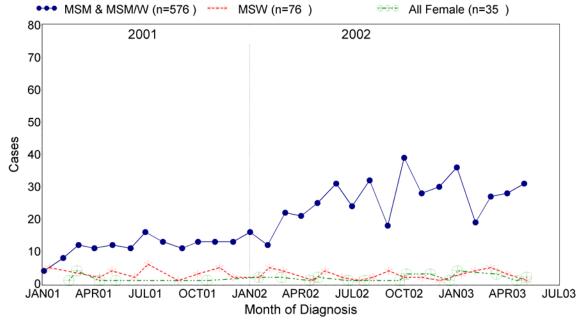


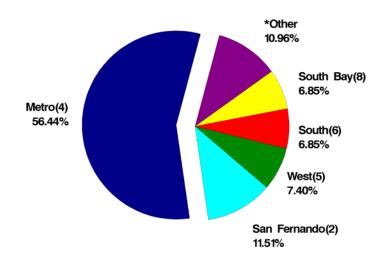
Figure 1: Early Syphilis by Sexual Orientation* and Month of Diagnosis,

Figure 2: Primary and Secondary Syphilis by Sexual Orientation* and Month of Diagnosis, January 1, 2001 Through May 31, 2003 (N = 687)

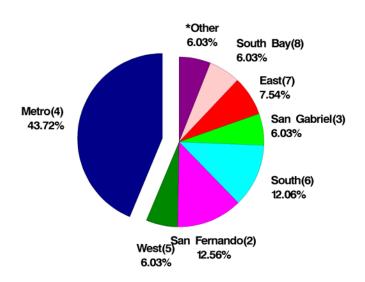


^{*} Does not include cases lacking partner information.

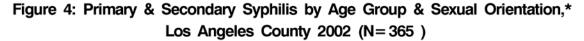
Figure 3: Primary and Secondary Syphilis by SPA* 2001–2002 (N= 564) 2002 (N= 365)







* SPAs having less than 6% of total cases are included in the 'Other' category. Table 2 contains numbers and percentages for all SPAs and Health Districts.



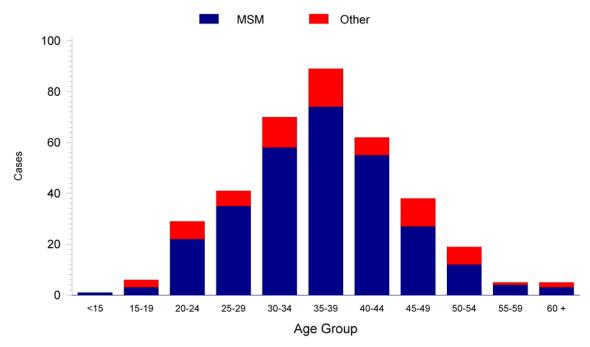
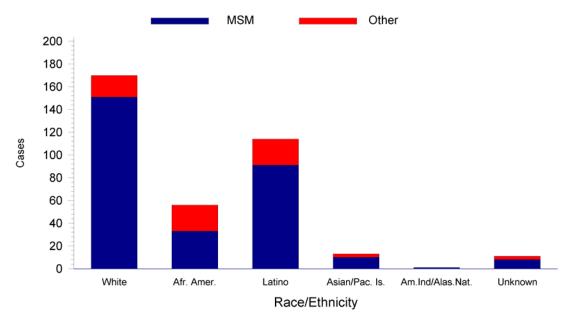


Figure 5: Primary & Secondary Syphilis by Race/Ethnicity & Sexual Orientation,*
Los Angeles County 2002 (N=365)



^{*} MSM includes MSM, MSM/W, and TG/STG. Other includes all other sexual orientation, including unknown.

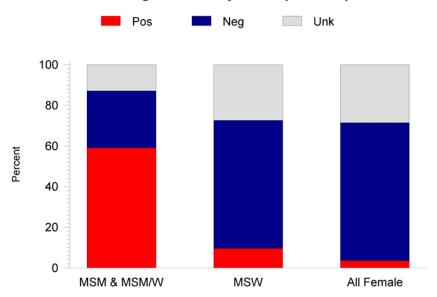
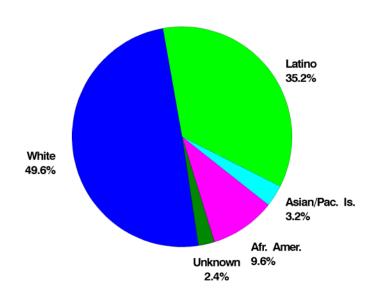


Figure 6. Early Syphilis by HIV Status & Sexual Orientation,*
Los Angeles County 2002 (N=649)

Figure 7. Race/Ethnicity of Early Syphilis Cases Who Frequented Bathhouses or Sex Clubs During the Critical Period,* Los Angeles County 2002 (N= 125)



^{*} The critical period during which the case was likely infected with syphilis

^{*} Does not include cases lacking partner information.

APPENDIX A: SURVEILLANCE NOTES

REPORT DELAY

Report delay is defined as the time interval between the date a syphilis diagnosis was made and the date the case was reported to the Health Department. Currently, the mean reporting delay for early syphilis is 20 days and the 95th percentile is 72 days. The impact of report delay must be considered when interpreting the data.

DATABASE UPDATE

Totals may not be consistent with previous reports of previous years due to report delay and periodic update of the database, including late reporting, changes in diagnosis, and some deletion of duplicates.

EXCEPTIONS

The following exceptions exist in the database used to generate the tables and graphs in the October 2003 Early Syphilis Surveillance Summary.

- Of 833 early syphilis cases, 281 cases are still open for investigation or are closure review queued.
- Of the 281 opened or closure review queued cases, 99 are cases without diagnosis pending investigation.

APPENDIX B: EARLY SYPHILIS CASE DEFINITION FOR INFECTIOUS CONDITIONS UNDER PUBLIC HEALTH SURVEILLANCE

State and local public health officials rely on health-care providers, laboratories, and other public health personnel to report the occurrence of reportable diseases to state and local health departments. Without such data, trends cannot be accurately monitored, unusual occurrences of diseases might not be detected, and the effectiveness of intervention activities cannot be easily evaluated.

The usefulness of public health surveillance data depends on its uniformity, simplicity, and timeliness. This case definition was established for uniform criteria for disease reporting and should not be used as the sole criteria for establishing clinical diagnoses, determining the standard of care necessary for a particular patient, setting guidelines for quality assurance, or providing standards for reimbursement. Use of additional clinical, epidemiological, and laboratory data may enable a physician to diagnose a disease even though the formal surveillance case definition may not be met.

This case definition was developed in collaboration with epidemiologists at the Centers for Disease Control and Prevention (CDC) and the Council of State and Territorial Epidemiologists (CSTE). It was approved by a full vote of the CSTE membership and also endorsed for use by the Association of Public Health Laboratories (APHL).

EARLY SYPHILIS CASE DEFINITION

Early syphilis includes primary, secondary and early latent cases reported within less than one year from the date of infection.

Syphilis is a complex sexually transmitted disease that has a highly variable clinical course. Classification by a clinician with expertise in syphilis may take precedence over the following case definitions developed for surveillance purposes.

PRIMARY SYPHILIS

Clinical description: A stage of infection with *Treponema pallidum* characterized by one or more chancres (ulcers); chancres might differ considerably in clinical appearance.

Laboratory criteria for diagnosis: Demonstration of *T. pallidum* in clinical specimens by darkfield microscopy, direct fluorescent antibody (DFA-TP), or equivalent methods.

Case classification - Probable: A clinically compatible case with one or more ulcers (chancres) consistent with primary syphilis and a reactive serologic test (nontreponemal: Venereal Disease Research Laboratory [VDRL] or rapid plasma reagin [RPR]; treponemal: fluorescent treponemal antibody absorbed [FTA-ABS] or microhemagglutination assay for antibody to *T. pallidum* [MHA-TP]).

Case classification - Confirmed: A clinically compatible case that is laboratory confirmed.

SECONDARY SYPHILIS

Clinical description: A stage of infection caused by *T. pallidum* and characterized by localized or diffuse mucocutaneous lesions, often with generalized lymphadenopathy. The primary chancre may still be present.

Laboratory criteria for diagnosis: Demonstration of *T. pallidum* in clinical specimens by dark field microscopy, DFA-TP, or equivalent methods.

Case classification - Probable: A clinically compatible case with a nontreponemal (VDRL or RPR) titer.

Case classification - Confirmed: A clinically compatible case that is laboratory confirmed.

EARLY LATENT SYPHILIS

Clinical description: A stage of infection caused by *T. pallidum* in which organisms persist in the body of the infected person without causing symptoms or signs. Latent syphilis is subdivided into early, late and unknown categories based on the duration of infection. When initial infection has occurred within the previous 12 months, latent syphilis is classified as early latent.

Case classification - Probable: Latent syphilis in a person who has evidence of having acquired the infection within the previous 12 months based on one or more of the following criteria:

- Documented seroconversion or fourfold or greater increase in titer of a nontreponemal test during the previous 12 months
- A history of symptoms consistent with primary or secondary syphilis during the previous 12 months.
- A history of sexual exposure to a partner who had confirmed or probable primary or secondary syphilis or probable early latent syphilis (documented independently as duration <1 year)
- Reactive nontreponemal and treponemal tests from a person whose only possible exposure occurred within the preceding 12 months

APPENDIX C: WHERE TO REPORT COMMUNICABLE DISEASES IN LOS ANGELES COUNTY

LABORATORY SLIP	CLINICIAN'S CMR	SEND REPORTS TO:
Syphilis Chlamydia Gonorrhea	Syphilis Chlamydia Gonorrhea Chancroid Non-gonococcal Urethritis Pelvic Inflammatory Disease	Sexually Transmitted Disease Program 2615 S. Grand Avenue, Rm. 450 Los Angeles, CA 90007 Telephone: 213-744-3070 Fax: 213-749-9602
AIDS HIV (As of July 1, 2002)	AIDS HIV (As of July 1, 2002)	HIV Epidemiology Program 600 S. Commonwealth Ave., Suite 805 Los Angeles, CA 90005 Telephone: 213-351-8516 Fax: 213-467-4683 http://lapublichealth.org/hiv/hivreporting.htm
Tuberculosis	Tuberculosis	Tuberculosis Control 2615 S. Grand Avenue, Rm. 507 Los Angeles, CA 90007 Telephone: 213-744-6271 Fax: 213-749-0926
Cryptosporidiosis Diphtheria Encephalitis arboviral E. coli O157:H7 Hepatitis A, acute Hepatitis B, acute Listeriosis Malaria Measles (Rubeola) Plague Rabies Typhoid Vibrio Species	List of reportable diseases: http://lapublichealth.org/acd/cdrs.htm	Acute Communicable Diseases Morbidity Unit 313 N. Figueroa St., Rm. 117 Los Angeles, CA 90012 Telephone: 213-240-7821 Call toll free: 888-397-3993 Fax toll free: 888-397-3778

REQUIRED INFORMATION ON THE CMR:

- ✓ Patient Information: Name, gender, ethnic group, date of birth, occupation, address, telephone number, social security number.
- ✓ Diagnosis: Diagnosis, date of diagnosis, date of onset.
- ✓ Reporting Person: Name, address, telephone number.

APPENDIX D: LOS ANGELES COUNTY STD SCREENING GUIDELINES FOR SEXUALLY ACTIVE HIV POSITIVE PERSONS

Due to the continuing rise in syphilis as well as gonorrhea and chlamydia, we recommend routine screening of HIV infected persons based on the following schedule in order to decrease the transmission of these curable STDs as well as HIV.

INITIAL VISIT AND ANNUAL VISIT

- 1. Testing should be performed for gonorrhea and chlamydia using urine testing for men and/or endocervical swab testing for women. Gonorrhea culture may also be used. Syphilis screening should be performed with an RPR.
 - a. Patients engaging in rectal intercourse should be cultured for GC and CT from the anal site. DFA may also be used for chlamydia.
 - b. Patients engaging in oral sex defined as activity in which they are orally exposed should be cultured for GC and CT from the pharyngeal area. DFA may also be used for chlamydia.
- 2. Women should be evaluated for the above, plus trichomoniasis using culture or vaginal wet mount.

FOLLOW-UP VISITS (EVERY 3 - 6 MONTHS)

HIV infected persons with symptoms of an STD should be screened upon presentation for care. Screening for syphilis, GC, and CT should be performed at 3 to 6 month intervals for persons at high risk for STDs but without STD symptoms. These persons include but are not limited to:

- 1. Persons with multiple or anonymous sex partners.
- 2. Past history of any STD.
- 3. Persons who have been recently incarcerated or those who have had sexual relations with someone recently incarcerated.
- 4. Persons reporting other behaviors associated with the transmission of HIV and other STDs. These include:
 - a. Participation in sexual activities in bathhouses, sex clubs or circuit parties,
 - b. Use of the internet to recruit sex partners,
 - c. Engaging in sexual activity for money or drugs,
 - d. Use of sexual enhancement drugs such as methamphetamines (i.e., meth, glass, crystal), ecstasy, ketamine, viagra, cocaine, crack, GHB, and nitrates/poppers.
- 5. Persons with sex or needle sharing partner(s) with any of the above risks.
- 6. Persons using injection drugs.
- 7. Persons living on the street/homeless.
- 8. Person living in areas with high STD prevalence. Sexually active gay men in the Los Angeles area are considered high-risk.



SEXUALLY TRANSMITTED DISEASE PROGRAM

2615 South Grand Avenue, Room 500 Los Angeles, CA 90007